

VEHICLES

How many driver training cars are being used by your school? (enter number then list cars below)					
YEAR	MAKE	MODEL	LICENSE NUMBER	DUAL CONTROLS? <input type="checkbox"/> Yes <input type="checkbox"/> No	PROPERLY SIGNED? <input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

INSURANCE

<p>Proof of liability insurance coverage from a company authorized to do business in Washington State is required in amounts not less than: \$100,000 bodily injury or death to one person; \$300,000 because of bodily injury to two persons in one accident; \$50,000 property damage to others in the accident; and Uninsured motorists coverage.</p> <p><i>Attach a copy of the policy or binder showing the required coverage.</i></p>		
NAME OF INSURANCE COMPANY	POLICY NUMBER	COMPANY (AREA CODE) TELEPHONE NUMBER

LEGAL

<p>Are there any civil actions now pending against this business or any member, directly or indirectly interested in this school? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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ATTESTATION

<i>I hereby certify that the above statements are true.</i>	
PRINT NAME OF OWNER, PARTNER, ASSOCIATE, OR CORPORATE OFFICER	
<u>X</u>	
SIGNED	DATE
PRINT NAME OF OWNER, PARTNER, ASSOCIATE, OR CORPORATE OFFICER	
<u>X</u>	
SIGNED	DATE
PRINT NAME OF OWNER, PARTNER, ASSOCIATE, OR CORPORATE OFFICER	
<u>X</u>	
SIGNED	DATE

Note: A false statement on this application is basis for refusal or revocation of a license.

Allow 30 days for application review and receipt of a letter of instruction on scheduling a school inspection.